

2811

Attorney Docket No.: 02SPE112P-DIV

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Zhao et al.	_
SERIAL NO.: 09/317,536 FILED: May 24, 1999	_
FOR: Interconnect with Low Dielectric Constant Insulators for Semiconductor Integrated Circuit Manufacturing	_
HONORABLE COMMISSIONER FOR PATENTS P.O. Box 1450, Alexandria, VA 22313-1450	

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

- ☐ No additional fee is required.
- ☑ The fee has been calculated as shown below:

⊠ EXTENSION FEE	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	110.00	55.00	\$ 110.00
SECOND MONTH AFTER TIME PERIOD SET	420.00	210.00	\$
THIRD MONTH AFTER TIME PERIOD SET	950.00	475.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,480.00	740.00	\$

■ TOTAL EXTENSION FEE \$ 110.00_

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	21	MINUS **21	*=0	x 18	x 9	\$
INDEPENDENT	4	MINUS ***4	*=0	x 86	x 43	\$
First presentation of multiple dependent claim				+ 290	+ 145	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
- ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
- *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

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110.00 DP

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	Total fee for Supplemental Information Disclosure Statement \$
×	Enclosed is the total fee of \$\frac{110.00}{}\$ (Payment by Credit Card, Form PTO-2038 Enclosed).
	Please charge Deposit Account No. 50-0731 in the amount of \$
☒	The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

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Michael Farjami, Reg. No. 38,135

<u>CERTIFICATE OF MAILING</u>
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on:

Typed or Printed Name of Person Mailing Paper and/or Fee

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